FUR INSTRUCTIONS, SEE BACK OF FORM DISCI OSTIRE SUMMARY PAGE FORM III I LE NAME (Must be same as on Statement DISC! OSUBE Lrica Amercia- Leadership Coalitins (PAROTOJAN 19) NETUKI IMPORTANT: Indicate type of committee you are reporting for: Comm. # (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate Logged in (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Cardinates Scanned Computer __ Candidate Name Audited **Political Party** Office Sought District (if Senate or House) 515-262-7828 TELEPHONE SIGNATURE OF TREASURER (or person filing this report) 18 Jan 10
DATE SIGNED Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: AM FILING A REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate one CHECK IF AMENDMENT TO REPORT DATED _____ Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.) County & Local Committees which Election is held STATEMENT OF CASE OF MANUE HAND at the beginning of the reporting period. (This is the total of all months. In this by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)\$ 295_01 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL 345. 01 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule F: Loan Repayments total (Attach Schedule F) ISH ON HAND at the end of this reporting period (if final report, belance must ... - Common of the state of th NUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ NDIDATE COMMITTEES ONLY: MOULTANT BREAKDOWN (Schedule G Allucine

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)		(1100: 07700)	TALOCK TO
COMMITTEE MARK (Advict be come on or Statement of Organization)			CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)		AME	NDING FORM
	ı		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09/05/09	ID# CK#	Rev Irvin Lewis, Sr. 3141 Sw 38th Pl. Des moines IA 50321		\$ 5000	
	ID#	·			
	CK#				
	CK#				
	ID#		·		
	CK#		•		
	ID# CK#				
	ID#			· · · · · · · · · · · · · · · · · · ·	
	CK#	·	-		
	ID# CK#				
	ID#				
	CK#	•			
	ID#				
	CK#				
	CK#				
			SUB-TOTAL	Ex 00	

TOTAL (if last page of this schedule)

MONETARY

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Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by namiage). If surname of contributor is the same as candidate, but there is no arritical relationship, enter not applicable in the relationship column.

(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME	(Must be same as on a	Statement of Oro	enization)
	former an extend 60 Off (ouncilott of org	CO PACILITY I

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) ANID PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/08/09	ID# CK#	Iowa State Book	Dormant Fee	\$ 5.00
%8/09	L	Iowa State Bank	Sales Tax	.30
10/30/09		Lowa State Bent	Dormant Fee Sales Tax	5. 00
10/30/09		Iowa State Bank	Sales Tox	. 30
	ID# CK#			
		h	SUB-TOTAL	\$ 10.60

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.6(3)(i).)

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TOTAL (if last page of this schedule)